



DEPARTMENT OF THE NAVY
BOARD FOR CORRECTION OF NAVAL RECORDS
2 NAVY ANNEX
WASHINGTON, D.C. 20370-5100

CRS
Docket No: 1700-00
6 December 2000

[REDACTED]

Dear [REDACTED]

This is in reference to your application for correction of your naval record pursuant to the provisions of Title 10, United States Code, Section 1552.

A three-member panel of the Board for Correction of Naval Records, sitting in executive session, considered your application on 6 December 2000. Your allegations of error and injustice were reviewed in accordance with administrative regulations and procedures applicable to the proceedings of this Board. Documentary material considered by the Board consisted of your application, together with all material submitted in support thereof, your naval record and applicable statutes, regulations and policies.

After careful and conscientious consideration of the entire record, the Board found that the evidence submitted was insufficient to establish the existence of probable material error or injustice.

The Board found that you enlisted in the Naval Reserve on 12 October 1965 at age 19. You reported to active duty on 17 January 1969. The record reflects that you received nonjudicial punishment and were convicted by two special courts-martial. The offenses included unauthorized absences totalling 99 days and failure to obey a lawful general order on two occasions. Subsequently, your request for a hardship discharge was disapproved.

A third special court-martial convened on 23 April 1970 and found you guilty of an unauthorized absence of 136 days. The court sentenced you to confinement at hard labor for six months, forfeitures of \$109 per month for six months and a bad conduct discharge. You received the bad conduct discharge on 31 August 1970.

In its review of your application the Board carefully weighed all potentially mitigating factors, such as the contention that the Board previously ignored medical and other documents that were

submitted which supported a hardship or medical discharge. The Board also considered all of the issues you cited on the attachment to your application. However, the Board concluded that these factors were not sufficient to warrant recharacterization of your discharge due to the fact that your unauthorized absences totalled about eight months. In this regard, there is no evidence of record that your request for a hardship discharge should have been granted or that you should have received a medical discharge. Based on the foregoing, the Board concluded that no change to the discharge is warranted. Accordingly, your application has been denied. The names and votes of the members of the panel will be furnished upon request.

It is regretted that the circumstances of your case are such that favorable action cannot be taken. You are entitled to have the Board reconsider its decision upon submission of new and material evidence or other matter not previously considered by the Board. In this regard, it is important to keep in mind that a presumption of regularity attaches to all official records. Consequently, when applying for a correction of an official naval record, the burden is on the applicant to demonstrate the existence of probable material error or injustice.

Sincerely,

W. DEAN PFEIFFER
Executive Director

**NATIONAL NAVAL MEDICAL CENTER
BEHAVIORAL HEALTHCARE CLINIC
DEPARTMENT OF PSYCHIATRY
BETHESDA, MD 20889-5600**

19 April 2000

From: LTC Ricky Malone, MC, USA

To: CAPT William Nash, Specialty Advisor for Psychiatry, Chief BUMED, Naval Hospital, San Diego, CA 92134-5000

Via: Chairman, Department of Psychiatry

Subj: APPLICATION FOR CORRECTION OF NAVAL RECORDS ICO [REDACTED]

Ref: (a) 10 U.S.C. 1552
(b) Board for Correction of Naval Records letter of 22 March 2000 to Specialty Advisor for Psychiatry

Encl: (1) BCNR File
(2) Service Record
(3) VA Records, Medical Records

1. Per your request for review of the subject's petition for a correction of his Navy records and in response to reference (b), I have thoroughly reviewed enclosures (1) through (3).

2. Review of available Navy medical records revealed:

- a. SF 502, Narrative Summary, dated 2 April 1982 from NRMC Long Beach, stating that [REDACTED] was admitted to the residential treatment center from 26 January 1982 through 10 March 1982 for the treatment of alcohol dependence and polydrug abuse. The report documents the presence of diagnostic criteria for alcohol dependence, and states that he participated satisfactorily in treatment and his response was judged as "fair." He was discharged on disulfiram with outpatient follow-up.
- b. SF 558, Emergency Care and Treatment, dated 23 February 1982 from NRMC Long Beach, documenting emergency treatment of an anxiety reaction while he was undergoing residential treatment noted above.
- c. SF 539, Abbreviated Medical Record, dated 27 January 1982 and SF 509, Progress Notes, dated 27 January through 9 February 1982, documenting satisfactory participation in the residential treatment program.

3. Review of the service record revealed:

- a. [REDACTED] entered active duty on 27 February 1980. He completed basic training and attended Airman Apprenticeship training at Great Lakes Naval Station. He had academic difficulties and voluntarily enrolled in the JOBS program. After schooling he was assigned to the USS Kitty Hawk from 8 January 1981 to 15 November 1982 when he was discharged for misconduct. He received his Airman Apprentice rating on 25 October 1981. He was reduced in rate on 20 March 1981 and again on 13 May 1982 as the result of non-judicial punishment for unauthorized absences of approximately one month each time. He also received non-judicial punishment on 18 August 1980 and 23 April 1981 for possession of marijuana, as well as on 18 May 1981 for unauthorized absence of less than one day.

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- b. [REDACTED]'s performance ratings while assigned to the Kitty Hawk ranged from 1.0 to 3.4, with a general downwards trend and recommendation for non-retention. His final trait average was 3.0 in all categories.
- c. [REDACTED] received the Navy Expeditionary Medal, the Humanitarian Service Medal, and the Sea Service Ribbon while assigned to the Kitty Hawk.
- d. SMN Miller was discharged under other than honorable conditions on 15 November 1982 for misconduct as the result of repeated UCMJ violations noted above and continued use of alcohol and marijuana after full rehabilitation efforts.


4. Review of the VA file and medical records revealed:

- a. VA Form 2507, Compensation and Pension Exam Report, dated 14 September 1995 from USVA Togus (Maine), which documents the presence of psychotic symptoms at the time of the evaluation with a diagnosis of schizophrenia, disorganized type. At that time the patient reported symptoms of depression and anxiety dating back to the early 1980's when he was in the Navy, and auditory hallucinations dating back to the early 1990's. The report concluded that it "would appear that [REDACTED] commenced symptoms of mental illness while on duty with the US Navy, and these apparently started off as anxiety and depression, and as the illness progressed and it has evolved to what appears to be a form of disorganized schizophrenia." His prognosis was judged to be "very poor."
- b. Psychiatric evaluation dated 9 February 1995 from Kennebec Valley Medical Center in Augusta ME, progress notes dated 25 October 1995 and 22 November 1995 from Counseling Services Inc., and Admission History and Physical dated 6 June 1998 from Mercy Hospital in Portland ME, which document ongoing problems with alcohol and substance abuse, as well as significant psychosis diagnosed as either schizophrenia or schizoaffective disorder, depressive type.
- c. Psychological Evaluation dated 16 February 1995 from the State of Maine Disability Determination Services which documents results of the Weschler Adult Intelligence Scale-Revised, clinical interview, mental status examination, activities of daily living, capability assessment and diagnosis. The evaluation reports results "within the average range of intellectual functioning, but...suggest the presence of cognitive impairments." The mental status examination revealed "no evidence to support the presence of a thought disorder" at the time of the evaluation, although there was no documentation of projective testing. Diagnoses at that time were poly-substance dependence in early partial remission and dysthymic disorder, late onset.

5. Discussion:

- a. Medical records from the past five years strongly support the diagnosis of a psychotic disorder, either schizophrenia or schizoaffective disorder, in addition to chronic problems with alcohol and poly-substance dependence. There is no documentation of psychotic symptoms prior to the early 1990's.
- b. Navy medical records contain evidence of anxiety in addition to alcohol and cannabis dependence. There is no documentation of depression or psychosis during his military service. Counseling statements from his service record suggest that he understood the wrongfulness of his actions and was aware of the consequences at the time.
- c. The natural history of [REDACTED] illness would suggest that problems displayed during his military service may have been premorbid manifestations of what was to become a psychotic disorder, and may even bear a relationship to his protracted history of substance abuse. Nevertheless, there is no evidence that he actually had symptoms at that time which would have made it possible to make or predict such a diagnosis, nor to account for the misconduct that led to his discharge.

6. Opinion and Recommendations: There is no evidence in the information provided to indicate that the subject's mental problems during military service were sufficiently mitigating to warrant recharacterization of his service.



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Psychiatry Resident



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